

Negative Pressure Wound Therapy

DME.SW.105.A

v2.0.2024

HCPCS Codes

A6550, A7000, E2402

Negative Pressure Wound Therapy Continued Rental - Criteria

Continued rental of negative pressure wound therapy is indicated when **all** of the following apply:

- There is documentation that wound healing is progressing
- There is monthly documentation of wound length, width and depth
- There is physician documentation of proper use and continued benefit

References

1. National Pressure Ulcer Advisory Panel, European Pressure Ulcer Advisory Panel and Pan Pacific Pressure Injury Alliance. Prevention and Treatment of Pressure Ulcers: Clinical Practice Guideline. Emily Haesler (Ed.). Cambridge Media: Osborne Park, Western Australia; 2014.
2. Gupta S, Gabriel A, Lantis J, Téot L. Clinical recommendations and practical guide for negative pressure wound therapy with instillation. *Int Wound J*. 2016;13(2):159-174. doi:10.1111/iwj.12452.
3. CGS Administrators, LLC, ed. Local Coverage Determination for Negative Pressure Wound Therapy Pumps (L33821). CMS.gov. <https://www.cms.gov/medicare-coverage-database/details/lcd-details.aspx?lcdid=33821>. Published October 1, 2015.
4. Hayes, Inc, ed. Negative Pressure Wound Therapy –Home Use: A Health Technology Assessment Prepared for Washington State Health Care Authority. www.hca.wa.gov. <https://www.hca.wa.gov/assets/program/npwt-final-report-20161012.pdf>. Published October 14, 2016.